								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003							RD	10/656/870					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			29					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			29 minus 20=		. 9	9		X\$ 9=		OR	X\$18=	16200	
INDEPENDENT CLAIMS				inus 3 =	* (X43			1	OR	X86=	102	
MULTIPLE DEPENDENT CLAIM PF			RESENT					+145=		OR	+290=	-	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	93200	
	CLAIMS AS AMENDED - PART II									1	OTHER		
_	 / /	(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A	39/6/	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 77	Minus	* 39	7	= /		X\$ 9=		OR	X\$18=		
AME	Independent	* 4 ENTATION OF MI	Minus	*** /	CLAIM	= /		X43=		OR	X86=	200	
			JETH EE JE	CHOCH	CEANN			+145=		OR	+290=		
							AE	TOTAL		OR	TOTAL ADDIT. FEE	PAIN	
(Column 1) (Column 2) (Column 3)										·	•	·	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDV	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
AM	Independent	* NTATION OF ML	Minus	***	CL AIM	=		X43=		OR	X86=		
			7ETH CE OLI	LIADEIAI	·			+145=		OR	+290=		
							AE.	TOTAL		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	,	
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	rino i PHESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM			+145=					
• (1	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 									OR	+290= TOTAL		
	the 'Highest Nur	nber Previously Painber Previously Pai nber Previously Paid ber Previously Paid	id For' IN THIS	S SPACE is	less than	1.3 enter "3."		TOTAL DIT. FEE I in the ap	propriate box		ODIT. FEE		